FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)					Offic	ce use only	
1. NAME OF COMMITTEE (in		eck if name hanged)	Example: If over the line	typying, type es	12FE	1 1 1	a dec ciny	
LONGHORN P	AC				ш			
			1111					
ADDRESS (number and	street) 7315 Wi	sconsin Aven	ue 				1 1 1 1	
X (Check if addr is changed)	Suite 70 Bethesd				L MD	L	20814 _	3202
			CITY		STATE	•	ZIP CODI	E 📥
COMMITTEE'S E-MAI								
cfs@talentpay					Ш			
					шш			
COMMITTEE'S WEB	PAGE ADDRESS (URL)							
			1111					
2025442616		YY						
2. DATE 0.2	27 / Y Y 2	0 0 7						
3. FEC IDENTIFICA	TION NUMBER	C	C004026	02				
4. IS THIS STATEM	MENT NEW (N)	OR	X A	MENDED (A)				
I certify that I have exami	ned this Statement and to th	e best of my know	ledge and belief	it is true, correct a	nd complete	•		
Type or Print Name of	Treasurer Emi	ly Hoover						
Type of Time Name of		,						
Signature of Treasurer	Electronically Filed by	Emily Hoov	er		Date	0 2 /	27	2007
NOTE: Submission of fa	lse, erroneous, or incomplet	e information may					f 2 U.S.C. S43	7g.
Office Use Only			Federa Toll Fre	rther information Il Election Commis ee 800-424-9530 202-694-1100			FEC FOR (Revised 02/2	